

## CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		#	x	S
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1	/						51		
2	/						52		
3	/						53		
4	/						54		
5	/						55		
6	/						56		
7	/						57		
8	/						58		
9	/						59		
10	/						60		
11	/						61		
12	/						62		
13							63		
14							64		
15							65		
16							66		
17							67		
18							68		
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40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	2	2	2	2	2	2	TOTAL IND.	2	2
TOTAL DEP.	10	10	10	10	10	10	TOTAL DEP.	10	10
TOTAL CLAIMS	12	12	12	12	12	12	TOTAL CLAIMS	12	12

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS